This form may be use		goods declaration a	GEROUS GOOD: as it meets the require 8, Annex III, Regulation	ments of			ition 54;	
1. SHIPPER/CONSIGNOR/SENDER			2. TRANSPORT DOCUMENT NUMBER		GE 1 PAGES	4. SHIPPER'S REFERENCE (TCN)		
5. FREIGHT FORWARDER'S REFERENCE	1		7. CARRIER (To be completed by the carrier)					
DOD NON-EXPLOSIVE HAZMAT: 1-800-851-8061 AT SEA: COLLECT (804) 279-3131 CHEM WARR (EXPLOSIVES) ONLY: (EXPLOSIVES) ONLY: (CATOMIC (A10) 4 AFTE (A2) 4 AFTE (A2) 4 AFTE			1436-3044/7211/6455 ER DUTY HOURS: 410) 436-2148 Ask for TEU S3		HOLDING 4-0331 L SPILLS: IST HOTLI 4-8802 OLLECT -2675	: DOD RA MATERIA! ARMY: (7 USAF: (2 NE: DLA: (7 USN/MC: emergency r provide	DIOACTIVE LS: COLLECT 03) 697-0218 02) 767-4011 17) 770-5283 Use 24-hour esponse number d by activity.	
8. THIS SHIPMENT IS WITHIN MILITARY VESSEL 10. VOYAGE DOCUMENT NUN SAILING DATE (To be complete				9. CONTAINER PACKING CERTIFICATE OR VEHICLE PACKING DECLARATION, DD FORM 2781, IS ATTACHED (X if applicable)				
12. PORT/PLACE OF DISCHARGE 13. DESTINATION								
14. SHIPPING DESCRIPTION MARKS	N OF GOODS (UN No info	., PSN, HC, SHC, PG ormation as required b	i, number and kind of pa by regulation)	ckage, an	d additional	NET MASS/QTY (kg/l)	GROSS MASS (kg)	
15. CONTAINER IDENTIFICATI VEHICLE REGISTRATION I		AL NUMBER(S)	17. CONTAINER/VE	HICLE A	ND TYPE		18. TARE MASS (kg)	
19. ADDITIONAL HANDLING II	NFORMATION							
20. RECEIVING ORGANIZATIO Received the above number a. RECEIVING ORGANIZATIO	of packages/contai	ners/trailers in app	arent good order and	conditio	າ, unless st	ated hereon:		
b. HAULER'S NAME	c. VEHICLE NO.	REGISTRATION	d. SIGNATURE AN	D DATE	DATE e. DRIVE		ER'S SIGNATURE	
21. SHIPPER PREPARING THIS		the content of the	o concierant and the	h. call		a a sib a di a bassa il sudi	o Droner Oktobio	
SHIPPER'S DECLARATION. I Name, and are classified, packar international and national govern	ged, marked, and la ment regulations.		nd are in all respects	n proper	condition f	or transport according		
a. NAME OF COMPANY/MILITARY UNIT			b. NAME/STATUS OF DECLARANT/CERTIFIER					
c. PLACE AND DATE			d. SIGNATURE OF DECLARANT/CERTIFIER					

INSTRUCTIONS FOR COMPLETING DD FORM 2890, DOD MULTIMODAL DANGEROUS GOODS DECLARATION

- **Item 1. Shipper/Consignor/Sender.** Enter the address and telephone number where the HAZMAT was certified.
- Item 2. Transport Document Number. The vessel manifest number to which the Multimodal Dangerous Goods Declaration will be attached may be entered in this block. The shipper need not enter this number. The accepting operator may enter it at the time it is assigned. This block may also be left blank.
- **Item 3. Page __ of __ Pages.** Enter the page number and total number of pages. Example: Page 1 of 1.
- **Item 4. Shipper's Reference Number (TCN).** Enter the 17-character TCN.
- Item 5. Freight Forwarder's Reference. Leave blank.
- **Item 6. Consignee.** Enter the six-digit DODAAC and/or the in-the-clear geographical location of the ultimate consignee (if known). For shipments of infectious substances, enter also the full address, name and telephone number of a responsible person for contact in an emergency.
- **Item 7. Carrier.** Enter Vessel Carrier Name. To be completed by the carrier.
- **24 Hour Assistance Telephone Number(s).** Circle applicable emergency number(s).
- Item 8. Shipment Within the Limitations Prescribed for Military Vessel/Commercial Vessel/Highway/Rail. Mark X in the appropriate block.
- Item 9. Container Certification/Vehicle Declaration.

 Declarant must mark X if applicable. U.S. Coast Guard or port officials may require verification of the container certification/vehicle declaration. DD Form 2781 is a detailed checklist which meets USCG/Customs requirements. DD Form 2781 must be signed and attached to DD Form 2890.
- **Item 10. Voyage Document Number and Sailing Date** (To be completed by the carrier). Enter the voyage document number and the date of sail.
- **Item 11. Port/Place of Loading.** Enter the three-digit POE code and/or the in-the-clear geographical location of the port of embarkation.
- **Item 12. Port/Place of Discharge.** Enter the three-digit POD code and/or the in-the-clear geographical location of the port of debarkation.
- Item 13. Destination. Enter destination address.

Item 14. Shipping Marks.

- 1. Enter the UN Number preceded by the letters "UN".
- 2. Enter the Proper Shipping Name.
- 3. Enter the primary hazard class and division number. For Class 1 material include the compatibility group letter. Any assigned subsidiary hazard class or division will be entered following the primary class in parenthesis.
- 4. Enter the Packing Group when assigned.
- 5. Enter additional information from the IMDG, Chapter 5.4, as required (i.e. Marine Pollutant, Flashpoint, Toxic Inhalation Hazard, RQ, etc.).
- 6. Enter the number and kind of packaging.

Item 14. Shipping Marks (Continued).

- 7. Enter the total quantity of dangerous goods of each item of HAZMAT bearing a different Proper Shipping Name, UN Number or Packing Group. For Class 1 material this quantity will be the net explosive mass (number of rounds being shipped X net explosive weight per round = net mass/qty).

 8. Enter the gross weight of the shipment for each item of HAZMAT bearing a different Proper Shipping Name, UN Number or Packing Group.
- Item 15. Container ID Number/Vehicle Registration Number. Enter ID number of the container or vehicle registration number.
- **Item 16. Seal Number(s).** Enter seal number installed on container.
- **Item 17. Container/Vehicle and Type.** Enter type and size of container or vehicle description.
- Item 18. Tare Mass (kg). Enter tare weight of the container.
- Item 19. Additional Handling Information. Optional.

If applicable, provide additional handling instructions.

Enter the Emergency Response Guide (ERG) Number(s) of the HAZMAT and attach the specific ERG page to DD Form 2890.

If applicable, drivers transporting regulated HAZMAT on European highways must be provided Transport Emergency Cards (TREMCARDS) in the host nation language which must be attached to the shipping papers.

Item 20. Receiving Organization Receipt. Leave blank as this will be filled out by the receiving organization. Signing this block states that the shipment is in good order, unless otherwise noted.

Item 21. Shipper Preparing This Form.

- a. Name of Company/Military Unit. Enter the name of company.
- b. Name/Status of Declarant/Certifier. Enter the name and status of the person signing the form.
- c. Place and Date. Enter the place and date the material was certified.
- d. Signature of Declarant/Certifier. The person who certifies on behalf of DOD that the shipment complies with the applicable regulatory requirements must sign the form.